



Express Mail No.: EV270263260US

PATENTS
BER-002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

Applicant : William Berson

Application No. : 10/824,975 Confirmation No. : 7527

Filed : April 14, 2004

For : LABEL FOR RECEIVING INDICIA HAVING
VARIABLE SPECTRAL EMISSIVITY VALUES

Group Art Unit : 3722

Examiner : Monica S. Carter

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

New York, New York 10020
December 13, 2004

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☐ Preliminary Amendment;
☒ Reply to Office Action; ☐ Power of Attorney;
☐ Associate Power of Attorney; ☐ formal drawings; and
☐ Replacement Drawings to be filed in the above-identified
patent application.

Also transmitted herewith is:

☒ Information Disclosure Statement.

This Statement is submitted before the mailing date of any of a final Office Action, a Notice of Allowance, or an Office Action that otherwise closes prosecution. In accordance with 37 C.F.R. § 1.97(c)(2), applicant has enclosed a check in the amount of \$180.00 in payment of the fee for submission of an Information Disclosure Statement. The Director is hereby authorized to charge payment of any additional fees required in connection with this Statement, or credit any overpayment of the same, to Deposit Account No 06-1075. A duplicate copy of this letter is transmitted herewith.

FEE FOR ADDITIONAL CLAIMS

[] A fee for additional claims is not required.

[X] A fee for additional claims is required.

The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	39 - 34	* = 5	X	\$ 25 =	\$125.00
INDEPENDENT CLAIMS	4 - 3	** = 1	X	\$100 =	\$100.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM				+ \$180 =	\$ 0.00

* If less than 20, insert 20.

TOTAL \$225.00

** If less than 3, insert 3.

[X] A check in the amount of \$225.00 in payment of the filing fee is transmitted herewith.

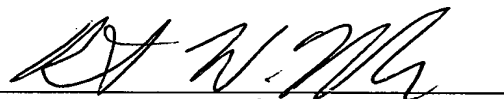
[X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

[] Please charge \$_____ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

- ☐ The following extension is applicable to the Response filed herewith; ☐ \$60.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$225.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ \$510.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$795.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,080.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).
- ☐ A check in the amount of ☐ \$60.00; ☐ \$225.00; ☐ \$510.00; ☐ \$795.00; ☐ \$1,080.00 in payment of the extension fee is transmitted herewith.
- ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge the ☐ \$60.00; ☐ \$225.00; ☐ \$510.00; ☐ \$795.00; ☐ \$1,080.00 extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



Robert W. Morris
Registration No. 36,613
Attorney for Applicant

FISH & NEAVE LLP
Customer No. 1473
1251 Avenue of the Americas
New York, New York 10020
Tel.: (212) 596-9000



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EXPRESS MAIL CERTIFICATION

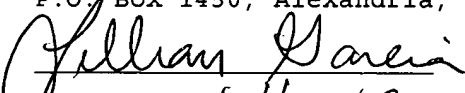
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Date of Deposit: December 13, 2004

I hereby certify that this certification and the following papers
and fees:

1. Transmittal Letter (in duplicate);
2. Reply to Office Action;
3. Information Disclosure Statement;
4. Form PTO/SB/08 (in duplicate);
5. Postcard;
6. Copies of nine (9) cited references;
7. Check for additional claims fee in the amount of \$250.00;
and
8. Check for Information Disclosure Statement fee in the
amount of \$180.00.

are being deposited with the United States Postal Service "Express Mail Post
Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated
above and are addressed to Mail Stop Amendment, Commissioner for Patents,
P.O. Box 1450, Alexandria, VA 22313-1450.


Name: Lillian Garcia